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MONTGOMERY - On Jan. 24, Alabama Attorney Gen. Steve Marshall, State Mental Health Commissioner Lynn Beshear, and Acting State Health Officer Dr. Scott Harris released the findings of the Alabama Opioid Overdose and Addiction Council, including a list of recommended actions the state can take to confront the opioid epidemic.

According to information from the U.S. Congressional Joint Economic Committee, Alabama saw a more than six-fold increase in opioid overdose deaths between 1999 and 2015 (the most recent year for which complete records are available), rising from fewer than one death per 100,000 population to just over six per 100,000. According to the Centers for Disease Control and Prevention (CDC), Alabama leads the nation in opioid prescriptions and opioid over-prescription. A sobering comparison of numbers:

- Alabama physicians wrote 5.8 million opioid prescriptions in 2015
- Alabama has 4.863 million citizens

That means that every man, woman and child (including the perfectly healthy ones) in Alabama could receive one prescription for opioid pain medication per year, and there would still be almost a million prescriptions left over. The opioid prescription rate in Alabama is 75 percent higher than the national rate. These numbers reflect only legal prescriptions, and do not account for the state's illicit drug trade, including improperly repurposed prescriptions, illegal mail order imports of foreign drugs and heroin use.

According to Executive Order 708 issued by Gov. Kay Ivey in August 2017, the Alabama Opioid Overdose and Addiction Council was created specifically to "identify a focused set of strategies to reduce the number of deaths and other adverse consequences of the opioid crisis in Alabama." Read the executive order at <https://ago.state.al.us/legacy/File-Exec%20Order%20708>.

The following comes from the official announcement of the issuance of the council's strategic action plan.

"Families, healthcare professionals and government officials at every level seek real solutions concerning the impact the opioid crisis has on Alabamians," said Lynn Beshear, commissioner, Alabama Department of Mental Health. "The next step in our effort will convene the Implementation Team of the Alabama Opioid Overdose and Addiction Council, as well as quarterly meetings of the full Council to implement researched opportunities. We believe the work of the Council offers preventive strategies, intervention and treatment options, and a community response that addresses this dire need. Working together, it will require organized sustained engagement of citizens and government with healthcare professionals."

Acting State Health Officer Dr. Scott Harris said, "Opioid addiction and abuse is a tremendous problem that affects Alabama in many different ways. Our hospitals, schools, churches and prisons are all struggling to deal with the problems caused by addiction and by increasing numbers of opioid deaths. The comprehensive action plan the Council has developed includes improvements to the Alabama Prescription Drug Monitoring Program that make it easier for prescribers to identify opioid abuse and to motivate abusers to find help for themselves, their families and communities. We are encouraged that the Council has offered strategies that have the potential to reverse this crisis that affects so many Alabamians, and appreciate the input of so many individuals to find effective solutions."

"After working with the dedicated people who have given so much of their time and concern to this Council and its subcommittees, I am heartened that we can make progress to fight the terrible blight of opioid abuse in Alabama," said Attorney General Steve Marshall. "I want to thank Governor Ivey for bringing us together in a commitment to search for solutions and work toward implementing them. I have been proud to serve with Commissioner Beshear and Dr. Harris in this vital endeavor, and I am grateful to all the members of this Council and its subcommittees for their outstanding achievement in bringing forth these valuable recommendations."

The council's report presents a four-pronged action plan to address prevention of opioid misuse, intervention within the law enforcement and justice systems, treatment of those with opioid use disorders, and community response that engages the people of Alabama in finding solutions at a local level. Some of the major findings are summarized below:

PREVENTION

- Improve and modernize the Alabama Prescription Drug Monitoring Program so that it will be more user-friendly, and more prescribers will participate and be better informed; the governor is requested to support a legislative appropriation of \$1.1 million to the Alabama Department of Public Health for this
- Strengthen prescription data and research capabilities and create a unique identifier for each individual patient
- Promote efforts to educate current and future prescribers, better implement current guidelines, adopt guidelines specific to opioid prescribing and impose mandatory opioid prescribing education
- Create a website and messaging campaign to reduce the stigma of opioid addiction; and implement an outreach program to teach young people the dangers and to avoid opioids
- Create a website and social media campaign to motivate opioid abusers to seek help and to effectively connect them and family members with ways to get help
- Create a partnership for the Alabama Department of Mental Health to provide training about addiction to law enforcement agencies and the judiciary

INTERVENTION

- Advocate legislation in the 2018 session to specifically prohibit trafficking in fentanyl and carfentanil, which is particularly important because vastly smaller amounts of these than other opioids can be deadly; for example, a lethal dose of fentanyl is 1000 times less than that of heroin, and the threshold amounts for the crimes of trafficking in fentanyl and carfentanil would better be measured in micrograms;
- As overdoses are 50 times greater for those leaving incarceration or other enforced abstinence, establish a process for the Department of Mental Health to reduce the stigma of medication assisted treatment, and begin a pilot program by the Department of Corrections in partnership with the Board of Pardons and Paroles to use naloxone, counseling and life skills to help released inmates remain drug free.

TREATMENT AND RECOVERY

- Promote adequate funding for treatment services and recovery support
- Establish collaboration between the Department of Mental Health and recovery support providers to increase access
- Support creating two addiction medicine fellowships to train Alabama physicians to recognize and treat substance abuse
- Expand access and target effective treatment and prevention programs to areas where there is greater need
- Improve education of professionals through continuing education for licensing and expand postsecondary and graduate curriculums

COMMUNITY RESPONSE

- Increase access to naloxone and maintain a list of participating pharmacies
- Prioritize naloxone to law enforcement and for distribution in areas of greatest need
- Provide naloxone training for first responders
- Encourage prescribing naloxone for high-risk patients
- Have a Community Anti-Drug Coalitions of America program in each judicial circuit and work toward having them at municipal levels
- Engage employers, businesses, higher education and private-sector in a network to get resources into communities
- Encourage having a Stepping Up Initiative in each county to work with the criminal justice system regarding incarceration of those with mental health problems
- Develop ways to provide service to veterans regarding opioid issues

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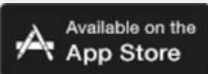
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